

EXHIBIT#6

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New York State Department of Motor Vehicles

POLICE ACCIDENT REPORT (NYC)

MV-104AN (5/04)

Precinct **025**
Accident No. **1752**Complaint
Number☐ AMENDED REPORT

1		Accident Date		Day of Week		Military Time		No. of Vehicles		No. Injured		No. Killed		Not Investigated at Scene <input type="checkbox"/>		Left Scene <input type="checkbox"/>		Police Photos <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
		Month Day Year		Sat		1346		02		0		0									
		RECONSTRUCTED <input type="checkbox"/> BICYCLIST <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER PEDESTRIAN <input type="checkbox"/>																			
2		VEHICLE 1 - Driver										VEHICLE 2 - Driver									
		License ID Number 217 893 356 State of Lic. CT										License ID Number L 2119 78967 08556 State of Lic. NJ									
		Driver Name - exactly as printed on license Ali Rashad										Driver Name - exactly as printed on license Yannick G Lecourieux									
		Address (Include Number & Street) 42 Bond St Apt. No. 										Address (Include Number & Street) 60 Glen Blvd Apt. No. 									
		City or Town Waterbury State CT Zip Code 06706										City or Town Glen Rock State NJ Zip Code 07452									
3		Date of Birth Month Day Year Sex Unlicensed No. of Occupants Public Property Damaged										Date of Birth Month Day Year Sex Unlicensed No. of Occupants Public Property Damaged									
		09 03 78 M <input type="checkbox"/> 05 <input type="checkbox"/>										08 07 55 M <input type="checkbox"/> 01 <input type="checkbox"/>									
		Name - exactly as printed on registration Ali Rashad Sex M Date of Birth Month Day Year 09 03 78										Name - exactly as printed on registration Yannick G Lecourieux Sex M Date of Birth Month Day Year 08 07 55									
		Address (Include Number & Street) 42 Bond St Apt. No. Haz. Mat. Code Released <input type="checkbox"/>										Address (Include Number & Street) 60 Glen Blvd Apt. No. Haz. Mat. Code Released <input type="checkbox"/>									
4		City or Town Waterbury State CT Zip Code 06706										City or Town Glen Rock State NJ Zip Code 07452									
		Plate Number 568SGT State of Reg. CT Vehicle Year & Make 2002 Honda Vehicle Type 4DSD Ins. Code 										Plate Number NSD41H State of Reg. NJ Vehicle Year & Make 1997 JEEP Vehicle Type SUV Ins. Code 962									
5		Ticket/Arrest Number(s) 										Ticket/Arrest Number(s) 									
		Violation Section(s) 										Violation Section(s) 									
6		Check if involved vehicle is: <input type="checkbox"/> more than 95 inches wide; <input type="checkbox"/> more than 34 feet long; <input type="checkbox"/> operated with an overweight permit; <input type="checkbox"/> operated with an overdimension permit.										Check if involved vehicle is: <input type="checkbox"/> more than 95 inches wide; <input type="checkbox"/> more than 34 feet long; <input type="checkbox"/> operated with an overweight permit; <input type="checkbox"/> operated with an overdimension permit.									
7		VEHICLE 1 DAMAGE CODES										VEHICLE 2 DAMAGE CODES									
		Box 1 - Point of Impact 8 Box 2 - Most Damage 1										Box 1 - Point of Impact 2 Box 2 - Most Damage 1									
		Enter up to three more Damage Codes 8 9 1										Enter up to three more Damage Codes 2 3 5									
		Vehicle Towed: N/A										Vehicle Towed: N/A									
8		VEHICLE DAMAGE CODING:										Circle the diagram below that describes the accident, or draw your own diagram in space #9. Number the vehicles.									
		1-13. SEE DIAGRAM ON RIGHT. 14. UNDERCARRIAGE 17. DEMOLISHED 15. TRAILER 18. NO DAMAGE 16. OVERTURNED 19. OTHER										Rear End Left Turn Right Angle Right Turn Head On Sideswipe (same direction) Left Turn Right Turn Sideswipe (opposite direction) #1									
9		Reference Marker										Place Where Accident Occurred: <input type="checkbox"/> BRONX <input type="checkbox"/> KINGS <input checked="" type="checkbox"/> NEW YORK <input type="checkbox"/> QUEENS <input type="checkbox"/> RICHMOND									
		Coordinates (if available)										Road on which accident occurred SB on E 132nd									
		Latitude/Northing: 907P										(Route Number or Street Name)									
		Longitude/Easting: X4M1										at 1) intersecting street SB on E 132nd + Harlem River Dr.									
		2010										(Route Number or Street Name)									
		or 2) <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of 										(Milepost, Nearest Intersecting Route Number or Street Name)									
10		Accident Description/Officer's Notes										Cost of repairs to any one vehicle will be more than \$1000. <input checked="" type="checkbox"/> Unknown/Unable to Determine <input type="checkbox"/> Yes <input type="checkbox"/> No									
		Veh #1 states he stopped as he exited the Hwy upon approaching a yield sign. Veh #2 states he also pressed on the breaks but due to the weather the road is wet and slide bumping Veh #1. Veh #1 passenger claims injuries to back & ribs @ Scene & MHA. Aided and prepared.																			
11		ALL INVOLVED										Names of all involved									
		8 9 10 11 12 13 14 15 16 17 BY TO 18										ALI, RASHAD ALI, MINERVA ALI, DANYAL ALI, DANYAH ALI, TANYAH YANNICK, G Lecourieux									
		A 1 1 4 1 28 M - - 6 - - B 1 3 4 1 22 F 6 12 6 5107 RMA C 1 4 5 1 4 M - - 6 - - D 1 5 5 1 3 M - - 6 - - E 1 6 5 1 3 F - - 6 - - F 2 1 4 1 51 M - - 6 - -										Date of Death Only - - - - - -									
12		Officer's Rank and Signature PO [Signature]										Tax ID No. 936535									
		Print Name DUTAN										NCIC No. 03030									
		Precinct 025										Post/Sector E									
		Reviewing Officer [Signature]										Date/Time Reviewed 10/30/06									

USE
COVER
SHEET

PEDESTRIAN/BICYCLIST/IN-LINE SKATER LOCATION 1. Pedestrian/Bicyclist/In-Line Skater at Intersection 2. Pedestrian/Bicyclist/In-Line Skater Not at Intersection	APPARENT CONTRIBUTING FACTORS HUMAN 2. Alcohol Involvement 3. Backing Unsafely 4. Driver Inattention * 5. Driver Inexperience * 6. Drugs (Illegal) 7. Failure to Yield Right-of-Way 8. Fell Asleep 21. Fatigued/Drowsy 9. Following Too Closely 10. Illness 11. Lost Consciousness 12. Passenger Distraction 13. Passing or Lane Usage Improper 14. Pedestrian's/Bicyclist's/Skater's Error/Confusion 15. Physical Disability 16. Prescription Medication 17. Traffic Control Disregarded 18. Turning Improperly 19. Unsafe Speed 20. Unsafe Lane Changing 40. Other Human *	VEHICULAR 41. Accelerator Defective 42. Brakes Defective 43. Headlights Defective 44. Other Lighting Defects 45. Oversized Vehicle 46. Steering Failure 47. Tire Failure/Inadequate 48. Tow Hitch Defective 49. Windshield Inadequate 60. Other Vehicular * ENVIRONMENTAL 61. Animal's Action 62. Glare 63. Lane Marking Improper/Inadequate 64. Obstruction/Debris 65. Pavement Defective 66. Pavement Slippery 67. Shoulders Defective/Improper 68. Traffic Control Device Improper/Non-Working 69. View Obstructed/Limited 80. Other Environmental *
PEDESTRIAN/BICYCLIST/IN-LINE SKATER ACTION 1. Crossing, With Signal 2. Crossing, Against Signal 3. Crossing, No Signal, Marked Crosswalk 4. Crossing, No Signal or Crosswalk 5. Riding/Walking/Skating Along Highway With Traffic 6. Riding/Walking/Skating Along Highway Against Traffic 7. Emerging from in Front of/Behind Parked Vehicle 8. Going to/From Stopped School Bus 9. Getting On/Off Vehicle Other Than School Bus 10. Pushing/Working On Car 11. Working in Roadway 12. Playing in Roadway 13. Other Actions in Roadway * 14. Not in Roadway (Indicate) *	TRAFFIC CONTROL 1. None 2. Traffic Signal 3. Stop Sign 4. Flashing Light 5. Yield Sign 6. Officer/Guard 7. No Passing Zone 8. RR Crossing Sign 9. RR Crossing Flashing LT. 10. RR Crossing Gates 11. Stopped School Bus-Red Lights Flashing 12. Construction Work Area 13. Maintenance Work Area 14. Utility Work Area 20. Other*	DIRECTION OF TRAVEL
LIGHT CONDITIONS 1. Daylight 2. Dawn 3. Dusk 4. Dark-Road Lighted 5. Dark-Road Unlighted	New York State Department of Motor Vehicles POLICE ACCIDENT REPORT MV-104AC (9/99) *EXPLAIN IN ACCIDENT DESCRIPTION If a question DOES NOT APPLY, enter a dash (-). If an answer is UNKNOWN, enter an "X".	PRE-ACCIDENT VEHICLE ACTION 1. Going Straight Ahead 2. Making Right Turn 16. Making Right Turn on Red 3. Making Left Turn 17. Making Left Turn on Red 4. Making U Turn 5. Starting from Parking 6. Starting in Traffic 7. Slowing or Stopping 8. Stopped in Traffic 9. Entering Parked Position 10. Parked 11. Avoiding Object in Roadway 12. Changing Lanes 13. Overtaking 14. Merging 15. Backing 20. Other *
ROADWAY CHARACTER 1. Straight and Level 2. Straight and Grade 3. Straight at Hillcrest 4. Curve and Level 5. Curve and Grade 6. Curve at Hillcrest	ROADWAY SURFACE CONDITION 1. Dry 2. Wet 3. Muddy 4. Snow/Ice 5. Slush 0. Other *	WEATHER 1. Clear 2. Cloudy 3. Rain 4. Snow 5. Sleet/Hail/Freezing Rain 6. Fog/Smog/Smoke 0. Other *
WHICH VEHICLE OCCUPIED 1. Vehicle No. 1 2. Vehicle No. 2 B. Bicyclist P. Pedestrian O. Other*	LOCATION OF MOST SEVERE PHYSICAL COMPLAINT 1. Head 2. Face 3. Eye 4. Neck 5. Chest 6. Back 7. Shoulder-Upper Arm 8. Elbow-Lower Arm-Hand 9. Abdomen - Pelvis 10. Hip-Upper Leg 11. Knee-Lower Leg-Foot 12. Entire Body	LOCATION OF FIRST EVENT 1. On Roadway 2. Off Roadway
POSITION IN/ON VEHICLE 1. Driver 2-7. Passengers 8. Riding/Hanging on Outside	TYPE OF PHYSICAL COMPLAINT 1. Amputation 2. Concussion 3. Internal 4. Minor Bleeding 5. Severe Bleeding 6. Minor Burn 7. Moderate Burn 8. Severe Burn 9. Fracture - Dislocation 10. Contusion - Bruise 11. Abrasion 12. Complaint of Pain 13. None Visible	TYPE OF ACCIDENT -- COLLISION WITH 1. Other Motor Vehicle 2. Pedestrian 3. Bicyclist 10. Other Object (Not Fixed)* COLLISION WITH FIXED OBJECT 11. Light Support/Utility Pole 12. Guide Rail-Not At End 25. Guide Rail-End 13. Crash Cushion 14. Sign Post 15. Tree 16. Building/Wall 17. Curbing 18. Fence 19. Bridge Structure 20. Culvert/Head Wall 21. Median-Not At End 26. Median-End 27. Barrier 22. Snow Embankment 23. Earth Embankment/Rock Cut/Ditch 24. Fire Hydrant 30. Other Fixed Object* NON-COLLISION 31. Overturned 32. Fire/Explosion 33. Submersion 34. Ran Off Roadway Only 40. Other*
SAFETY EQUIPMENT USED 1. None 2. Lap Belt 3. Harness 4. Lap Belt/Harness 5. Child Restraint Only 6. Helmet 7. Air Bag Deployed 8. Air Bag Deployed/Lap Belt 9. Air Bag Deployed/Harness A. Air Bag Deployed/Lap Belt/Harness B. Air Bag Deployed/Child Restraint 0. Other*	EJECTION FROM VEHICLE 1. Not Ejected 2. Partially Ejected 3. Ejected	VICTIM'S PHYSICAL AND EMOTIONAL STATUS 1. Apparent Death 2. Unconscious 3. Semiconscious 4. Incoherent 5. Shock 6. Conscious
INJURED TAKEN 17 BY TO 18	COVER SHEET <div style="font-size: 2em; font-weight: bold; margin: 0;">M</div>	